

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000582

FILED  
Mar 18, 2010  
Secretary of State

**Entity Name:** LIFE CHRISTIAN BIBLE INSTITUTE, INC.

**Current Principal Place of Business:**

410 EAST CHAPMAN ROAD  
TAMPA, FL 33549

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 272360  
TAMPA, FL 336882360

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WINGATE, DOUGLAS J DR.  
410 EAST CHAPMAN ROAD  
TAMPA, FL 33549 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PDT  
Name: WINGATE, DOUGLAS J DR.  
Address: 16120 CHASTAIN RD  
City-St-Zip: ODESSA, FL 33556

Title: VP  
Name: WINGATE, SUSAN E MRS.  
Address: 16120 CHASTAIN RD  
City-St-Zip: ODESSA, FL 33556

Title: STD  
Name: COFLIN, DIANNE M MRS.  
Address: 14502 CLIFTY CT  
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOUGLAS J. WINGATE

DR.

03/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date